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| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | |
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| 10/538,450 | 12/16/2005 | Akira Yoda | 58343US005 | 3798 | |
| 7550 3M INNOVATIVE PROPERTIES COMPANY PO BOX 33427 | | | EXAM | EXAMINER | |
| | | | GREEN, TRACIE Y | | |
| ST. PAUL, MN 55133-3427 | | ART UNIT | PAPER NUMBER | | |
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| | | | 07/16/2008 | ELECTRONIC | |

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Notice of the Office communication was sent electronically on above-indicated "Notification Date" to the following e-mail address(es):

LegalUSDocketing@mmm.com LegalDocketing@mmm.com

Application No. Applicant(s) 10/538.450 YODA ET AL. Interview Summary Examiner Art Unit TRACIE Y. GREEN 2879 All participants (applicant, applicant's representative, PTO personnel): (1) TRACIE Y. GREEN. (3) (2) Carolyn Fisher. (4)____. Date of Interview: 09 July 2008. c) Personal (copy given to: 1) applicant 2) applicant's representative Exhibit shown or demonstration conducted: d) Yes e) No. If Yes, brief description: _____. Claim(s) discussed: N/A. Identification of prior art discussed: N/A. Agreement with respect to the claims f) was reached. g) was not reached. h) N/A. Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Confirmed that no response has been submitted. (A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.) THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Examiner's signature, if required

Attachment to a signed Office action.